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POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/675128
	Filing Date	September 30, 2003
	First Named Inventor	Nada Milosavljevic
	Title	Quick Notation Medical
	Art Unit	3626
	Examiner Name	Rapillo, Kristine K
	Attorney Docket Number	49605-109902

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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I am the:

☒ Applicant/Inventor.

OR

☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.72(b) (Form PTO/SB/R1) submitted herewith or filed on

Signature

Name

Title and Company

SIGNATURE of Applicant or Assignee of Record

Date

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12/9/09

401.595.0600

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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